

HEALTH QUARTERLY STATEMENT

As of September 30, 2001 of the Condition and Affairs of the

Maine Partners Health Plan, Inc.

NAIC Group Code 0671, 0671 (Current Period) (Prior F		mpany Code 95728	Employer's ID Number 01-0511382
Organized under the Laws of Maine			State of Domicile or Port of Entry Maine
Country of Domicile United States of	America		
Licensed as business type Date Incorporated or Organized May	o		
			,
Statutory Home Office		ortland ME 04106-6911 Town, State and Zip Code)	
Main Administrative Office		ortland ME 04106-6911 Town, State and Zip Code)	207-822-7000 (Area Code) (Telephone Number,
Mail Address		ortland ME 04106-6911 (City or Town, State and Zip Code)	
Primary Location of Books and Records	2 Gannett Drive South Portland ME 04106-6911 (Street and Number) (City or Town, State and Zip Code)		207-822-7000 (Area Code) (Telephone Number,
Internet Website Address	www.mainepartners.com		
Statement Contact	Shawn Kevin Staples (Name) shawn.staples@anthem.com (E-Mail Address)	7	207-822-7942 (Area Code) (Telephone Number) (Extension, 207-822-8999 (Fax Number,
	OF Chairman of the Board President	FICERS Roger Thomas Pezzui James William Donova	
	Treasurer Secretary	Vincent Salvatore Con James Thomas Parker	ti
	VICE P	RESIDENTS	
	BOARD O	F DIRECTORS	
Vincent Salvatore Conti James Thomas Parker	Mary Callam Brandes , M.D. William Lewis Caron , Jr. Erin Patricia Hoeflinger Betsy Anne Holmes	George Steven Isaacson Guy William Marszalek # Donna O'Leary Moore # Harry Eastman Page , Jr.	Martin Jack Robles , Esq.
State of Maine County of			
stated above, all of the herein described ass herein stated, and that this statement, togeth statement of all the assets and liabilities and deductions therefrom for the period ended, a	ets were the absolute property of the ner with related exhibits, schedules a of the condition and affairs of the sa and have been completed in accordants: (1) state law may differ; or, (2) that	e said reporting entity, free and cle nd explanations therein contained id reporting entity as of the report nce with the NAIC <i>Annual Statem</i> state rules or regulations require	aid reporting entity, and that on the reporting period ear from any liens or claims thereon, except as I, annexed or referred to, is a full and true ing period stated above, and of its income and nent Instructions and Accounting Practices and differences in reporting not related to accounting
(Signature)	 (Signature)		Signature)
James William Donovan	<u>James Thomas Parker</u>		Vincent Salvatore Conti
(Printed Name)	(Printed Name)		Printed Name)
President	Secretary	٦	Treasurer

Subscribed and sworn to before me this